

Print Detail of Accounts

Last Posted: 3/04/10

Fy: 2009/2010

Ran: 03/10/2010

09:24 AM

080-010-533-93

DUES AND LICENSES

Req	Date	Vendor/Descript	Deductions	Additions	Money Left To Spend
		Beginning Budget Amount			33889.00
10-00001	VR 12/02/09	NATIONAL ASSOCIATION OF COUN POSTED	3694.00	.00	30195.00
10-00003	VR 12/02/09	ILLINOIS ASSN OF COUNTY BOAR POSTED	1700.00	.00	28495.00
10-00005	VR 12/16/09	CHAMPAIGN COUNTY CHAMBER OF POSTED	245.00	.00	28250.00
10-00006	VR 12/16/09	CHAMPAIGN COUNTY TREASURER POSTED	22365.00	.00	5885.00
10-00009	VR 12/28/09	UNITED COUNTIES COUNCIL OF I POSTED	880.00	.00	5005.00
10-00012	VR 1/21/10	CHAMPAIGN COUNTY ECONOMIC DE POSTED	5000.00	.00	5.00
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			33884.00	.00	

No. 10-00001FY: 2009/2010

Date 11/19/2009Department COUNTY BOARD

County Auditor Use Only

Vendor No. 50102

Appropriation Acct. No. 080-010-533.93

Payment Due Date Advance Check Needed

Terms & Conditions

Quantity	Full Description of Required Purchase/Or Service Rendered	Unit Price	Total
	COUNTY MEMBERSHIP DUES 1/1/10-12/31/10 ID 0000170190 INVOICE 61089		3,694.00
		Total:	3,694.00

V { NATIONAL ASSOCIATION OF COUNTIES

E {

N {

D { PO BOX 79007

O {

R { BALTIMORE, MD 21279-0007

The items listed above are a proper charge against the appropriation shown hereon and the service or materials are to be used exclusively for the purpose against which items are charged.

** PLEASE SIGN IN BLUE INK **

Department Authorized Signature

Date Goods/Services Received

Attn:

County Auditor Use Only

Funds Approved Auditor A/P Check Date

PAYMENT REQUISITION

Terms & Conditions _____

P A Y M E N T C O P Y

PAYMENT REQUISITION

Terms & Conditions _____

Quantity	Full Description of Required Purchase/Or Service Rendered	Unit Price	Total
	2010 COUNTY MEMBERSHIP SERVICES 12/1/09-11/30/10		22,365.00
		Total:	22,365.00

Date Goods/Services Received

Funds Approved _____ Auditor _____ A/P Check Date _____

PAYMENT REQUISITION

FY: 2009/2010

Department COUNTY BOARD

Payment Due Date	Advance Check Needed
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Terms & Conditions

The items listed above are a proper charge against the appropriation shown hereon and the service or materials are to be used exclusively for the purpose against which items are charged.

**** PLEASE SIGN IN BLUE INK ****

Department Authorized Signature

Date Goods/Services Received _____

Attn: _____

County Auditor Use Only

Funds Approved Auditor A/P Check Date _____

Print Detail of Accounts

Last Posted: 3/04/10

Fy: 2009/2010

Ran: 03/10/2010

09:18 AM

080-016-533-93

DUES AND LICENSES

Req	Date	Vendor/Descript	Deductions	Additions	Money Left To Spend
		Beginning Budget Amount			3300.00
16-00003	VR 12/02/09	CENTRAL ILLINOIS HUMAN RESOU Posted	45.00	.00	3255.00
16-00010	VR 1/04/10	GOVERNMENT FINANCE OFFICERS Posted	210.00	.00	3045.00
16-00032	VR 1/27/10	GOVERNMENT FINANCE OFFICERS Posted	550.00	.00	2495.00
			-----	-----	
			805.00	.00	

PAYMENT REQUISITION

[illegible]

Quantity	Full Description of Required Purchase/Or Service Rendered	Unit Price	Total
	MEMBERSHIP DUES FOR AMANDA TUCKER 1/1/10-12/31/10 INVOICE 001		45.00
		Total:	45.00

V
E
N
D
C
R

CENTRAL ILLINOIS HUMAN RESOURCES GROUP
ATTN: D WRIGHT
PO BOX 7291
CHAMPAIGN, IL 61826-7291

Attn: _____

County Auditor Use Only

Funds Approved _____ Auditor _____ A/P Check Date _____

PAYMENT REQUISITION

Date 12/18/2009 Department ADMINISTRATIVE SERVICES

Terms & Conditions _____

V E	<u>GOVERNMENT FINANCE OFFICERS ASSOCIATION</u>	The items listed above are a proper charge against the appropriation shown hereon and the service or materials are to be used exclusively for the purpose against which items are charged.
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**** PLEASE SIGN IN BLUE INK ****

Department Authorized Signature

Date Goods/Services Received _____

Attn:

County Auditor Use Only

Funds Approved	Auditor	A/P Check Date

Terms & Conditions _____

P A Y M E N T C O P Y